

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<del>FEE DETERMINATION</del>	<i>JS</i>		<i>12-7-01</i>
O.I.P.E. CLASSIFIER		<i>1117</i>	<i>12/17/01</i>
FORMALITY REVIEW	<i>H-T.</i>		
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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BEST AVAILABLE COPY

12/17/01